

Payment Receipt

Generated On 11/02/2024



Remita Retrieval Reference (RRR)

1709-9261-7628

PAYER INFORMATION

NAME	OYEBEMI PEMISAYO
EMAIL	OYEBEMIPEMISAYO@GMAIL.COM
PHONE NUMBER	234 806 229 9384

PAYMENT DETAILS

PAYMENT DATE	PAYMENT REF	SERVICE DESCRIPTION	AMOUNT (NGN)	CHARGES (NGN)	VAT ON CHARGES (NGN)	TOTAL (NGN)
11/02/2024	170992617628	ANNUAL RETENTION FEE	4,000.00	150.00	11.25	4,161.25
		TOTAL PAID	4,000.00	150.00	11.25	4,161.25
		TOTAL AMOUNT				4,161.25
		BALANCE DUE				0.00

Being payment in respect of ANNUAL RETENTION FEE

ITEM	QUANTITY	UNIT PRICE (NGN)	AMOUNT (NGN)
Bulletin	1	1,000.00	1,000.00
Medical Laboratory Technician	1	3,000.00	3,000.00
		Charges	150.00
		VAT on Charges	11.25
		TOTAL	4,161.25

BILLER REQUIRED INFORMATION

ITEM	DESCRIPTION
Description	2024 LICENSE RENEWAL
Practitioner Id (Rr No./Rf No./Mlt No.Mla No.)	MLT 9014

PAYMENT CHANNEL INFORMATION

PAYMENT CHANNEL	MASKED CARD PAN	AUTHORIZATION REF	CARD SCHEME
USSD - CoralPay			

